Only

FE5AN018

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

RECEIVED ENATE PUBLIC TO THE SENATE

(Revised 02/2003)

FOR An Authorized Committee					14 OCT Sinder USE ONE: 10		
1. NAME OF TYPE OR PRINT ▼ Example: If typing, t OMMITTEE (in full) over the lines.			ıg, type	ype 12FE4M5			
FRIENDS OF NANCY	=	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	1 1 1 1						
ADDRESS (number and street)	295 SEVEN F	FARMS DRIVE SUITE C-186					
Check if different							
than previously reported. (ACC)	CHARLESTON SC 29492 - L						
2. FEC IDENTIFICATION N	UMBER ▼	CITY	<b>\</b>	S	STATE A	ZIP CODE A STATE ▼ DISTRICT	
C C00549295		3. IS THIS REPORT	NEV (N)	OR	AMEND (A)	SC 00	
4. TYPE OF REPORT (Choose One)							
(a) Quarterly Reports:		(b) 12-Day F	RE-Election Rep	ort for the:	*	Source	
grante			Primary (12F	) [	General (1	2G) Runoff (12R)	
April 15 Quarterly	Report (Q1)		Convention	12C)	Special (1	2S)	
July 15 Quarterly F	<b>8</b> *			, -p (·			
October 15 Quarterly Report (Q3)		Election	on M M	/ [0 0] /	Y Y Y Y	in the State of	
January 31 Year-End Report (YE)		(c) 30-Day F	OST-Election Re	port for the:			
			General (300	i) []	Runoff (30	PR) Special (30S)	
Termination Report (TER)		Election	11 11	, a	Y * Y * Y * Y	in the State of	
5. Covering Period 07 01 / 2014 through 09 30 / 2014							
certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.							
(i) quadrature of Treasurer Dan Backer							
		>71/			I M M	/ D D / Y Y Y Y	
n I inature of Treasurer Dan	Backer Jen	1//		Da	ate <u>[C</u>	20.1.4	
TE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
Office						FEC FORM 3	